



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E359484**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	14-02368
LOCAL AGENCY CODING	0664
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIBAL RESERVATION	
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M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 09 - 25 - 2014	0656	31		
N S E W IN OF 0664				

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>
8 ST SE	BLOCK NO. <input checked="" type="checkbox"/>	7900
	MILE POST <input type="checkbox"/>	

DISTANCE	OF (REFERENCE OR CROSS STREET)

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 5419156994
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LAST NAME	RHODES	FIRST NAME	DAKOTA	MIDDLE INITIAL	K
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STREET NEW ADDRESS	30471 LONGVIEW LN
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CITY	COTTAGE GROVE	ST	OR	ZIP	97424
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CDL	RESTRICTIONS B	ENDORSEMENTS	
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DRIVER'S LICENSE #	3577384	STATE	OR	SEX	M	D.O.B.	01	25	1997
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE 2	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	C16219A	STATE	WA	VIN#	1B7HG48X52S516062
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2002	MAKE	DODG	MODEL	DAKPU	STYLE	4C	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # ALLSTATE 976644396	CITATION #		CHARGE	
VEHICLE LEGALLY STOPPED YES <input type="checkbox"/> NO <input type="checkbox"/>					



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4253449255
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LAST NAME	MOSS	FIRST NAME	THAWNA	MIDDLE INITIAL	L
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STREET NEW ADDRESS	8518 14TH PL SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982586646
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CDL	RESTRICTIONS B	ENDORSEMENTS	
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DRIVER'S LICENSE #	MOSS*TL329J9	STATE	WA	SEX	F	D.O.B.	04	29	1968
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE 2	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	378ZCC	STATE	WA	VIN#	2CNDL73F056160312
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2005	MAKE	CHEV	MODEL	EQUINOX	STYLE	4C	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # PROGRESSIVE 70033930	CITATION #		CHARGE	
VEHICLE LEGALLY STOPPED YES <input type="checkbox"/> NO <input type="checkbox"/>					



OFFICER'S NAME (PRINT)	N. ADAMS #127	BADGE OR ID #	127	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO.

E359484

CASE #

14-02368

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NARRATIVE

On 09/25/14 at about 0657 hours (all times approximate) I was dispatched to a collision (non injury, non blocking) at 79th Ave SE and 8th St SE in the city of Lake Stevens.

Vehicle 1 was traveling northbound on 79th Ave SE and exceeding reasonably safe speeds for conditions (raining with wet roads). While Vehicle 1 made the turn in the road eastbound onto 8th St SE it slid across the center yellow divider which caused a front end collision with Vehicle 2.

Vehicle 1 was driven away from the scene while Vehicle 2 was towed by the owner.

Both drivers and passenger filled out and signed a witness form which was added to this report.

I took photographs of the location and vehicles involved, which I later printed the images and added to this report as well as placed on a CD and booked into evidence.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

N. ADAMS #127

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

09-25-14 01:04 PM

DATED

PLACE SIGNED

APPROVED BY

SGT. C. VALVICK 71

DATE

9/25/2014 4:00:26 PM

BADGE OR ID # 127

ORI #

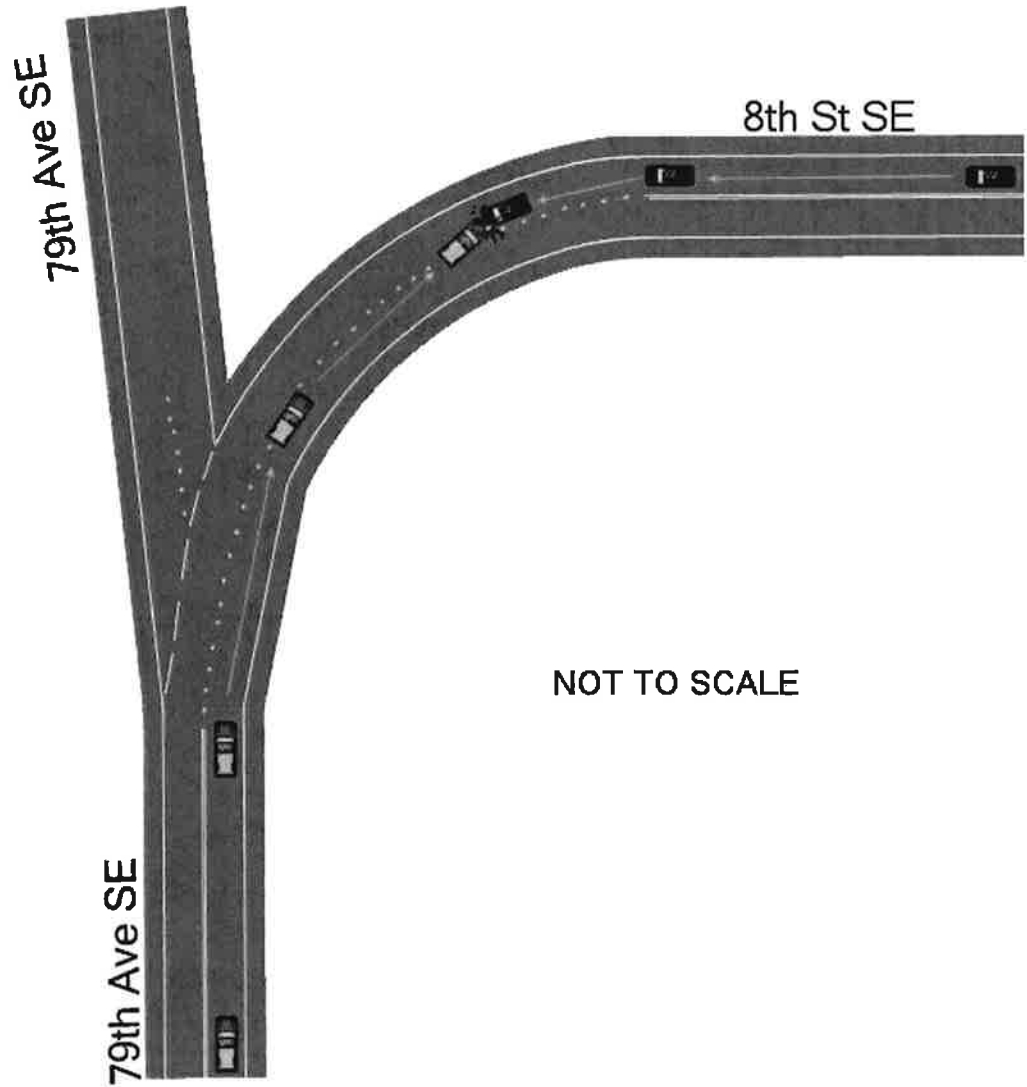
WA0311900

TIME POLICE DISPATCHED

6:57 AM

TIME POLICE ARRIVED

7:11 AM



# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02368

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Moss Thawna L	RACE W	ETH C	SEX F	DOB 4/29/68	AGE 46	HGT 5'4"	WGT 150	HAIR B	EYES B
STREET ADDRESS 8518 14th place SE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS Yes		
HOME PHONE		CELL PHONE (425) 344-9255		PLACE OF EMPLOYMENT First American Title						
WORK PHONE (425) 551-4151		EMAIL ADDRESS Thawna@hotmail.com								

I, Thawna Moss, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving down 8th Street towards 20th came around corner and was hit on the driver side front panel. The other vehicle was in my lane.

LSPD  
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE <u>Thawna Moss</u>	DATE SIGNED 9/25/2015	LOCATION SIGNED 8th St. HS, Lake Stevens
OFFICER/NUMBER: Adams #127	DATE SIGNED 9/25/14	LOCATION SIGNED Lake Stevens Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER 14-02368

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) D. Rhodes, Dakota K	RACE	ETH	SEX M	DOB 01/25/97	AGE 17	HGT 6'1	WGT 175	HAIR B	EYES Blue
STREET ADDRESS 8541 10th St SE		CITY Lake Stevens			STATE WA		ZIP 98258		RES. STATUS	
HOME PHONE		CELL PHONE 541-915-6994			PLACE OF EMPLOYMENT Everett Downtown Storage					
WORK PHONE		EMAIL ADDRESS Rhodes.Dakota1@gmail.com								

I, \_\_\_\_\_, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was coming from 79th Ave onto 8th St when my tires lost traction while going into a turn, my driver side light then proceeded to collide with their's.

I then got out to see if she was ok she said yes just shookin up, we then moved our cars out of the way and called the police.

LSPD  
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Dakota Rhodes	DATE SIGNED 09/25/1997	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: Adams #127	DATE SIGNED 9/25/14	LOCATION SIGNED Lake Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02368

### VICTIM / WITNESS

NON-DISC	NAME (LAST, FIRST MIDDLE) Rymparsurat Jirax	RACE Asian	ETH Thai	SEX M	DOB 8/31/97	AGE 17	HGT	WGT	HAIR	EYES Brown
STREET ADDRESS 7815 14 <sup>th</sup> St. SE		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE		CELL PHONE 425-320-6064			PLACE OF EMPLOYMENT Moe Phim Lake Wood Trg					
WORK PHONE		EMAIL ADDRESS pseaboy123 @ <del>lake</del> yahoo.com								

I, \_\_\_\_\_, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

On the way to school my friend, Dakota Rhodos, who was giving me a ride was going up 79<sup>th</sup> Ave Ne. As we turned right on 8<sup>th</sup> the truck lost traction and we slid half way onto the other lane, ~~about the~~ not all the way into it. There was another car and they hit, my glasses fell off so I didn't see much. It looked to me like the front middle of the truck hit the front left corner of the other lady's car.

LSPD  
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <i>June</i>	DATE SIGNED 9-25-2014	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: Adams #127	DATE SIGNED 9/25/14	LOCATION SIGNED Lake Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1



LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>#127 Adams</i>		Case Number <i>14-02368</i>	
Type of Crime: <del>Felony</del> / Misdemeanor (Circle)		Type of Case: <i>Collision</i>		Date/Time: <i>9/25/14 12:45</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			

Item # <i>NA 1</i>	Item <i>CD with pics</i>		Brand Name <i>Compucessory</i>		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Action # <i>3</i>	Serial #	Where Found	Weight of Narcotic		

Owner's Name <i>LSPD</i>					Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>#127</i>											

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Action #	Serial #	Where Found	Weight of Narcotic		

Owner's Name					Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions											

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Action #	Serial #	Where Found	Weight of Narcotic		

Owner's Name					Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions											

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Action #	Serial #	Where Found	Weight of Narcotic		

Owner's Name					Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions											

Item #	Item		Brand Name		Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Action #	Serial #	Where Found	Weight of Narcotic		

Owner's Name					Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions											

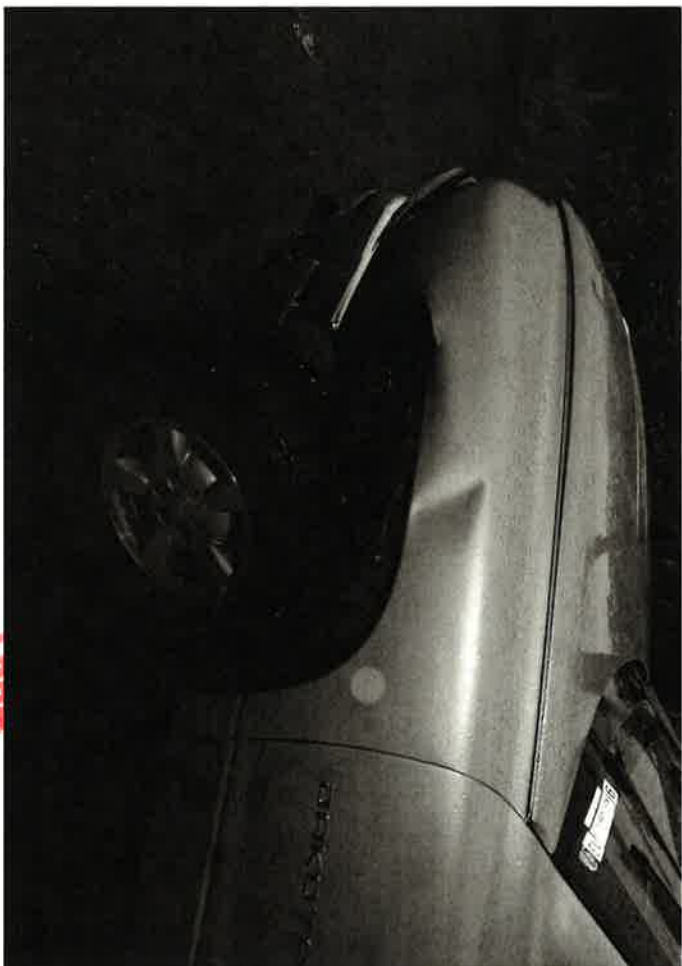
  

Evidence Control Use Only:											
Received by Evidence:		NCIC/WACIC ✓		Date:		CAD/RMS Checked		ROUTING: _____			
Name: _____ # _____		NCIC/WACIC +		Date:		Owner Letter Sent:		White: Property Room			
Date: _____ Time: _____		NCIC/WACIC -		Date:		Owner Letter Sent:		Yellow: Case File			



LSPD  
ORIGINAL





LSPD  
ORIGINAL

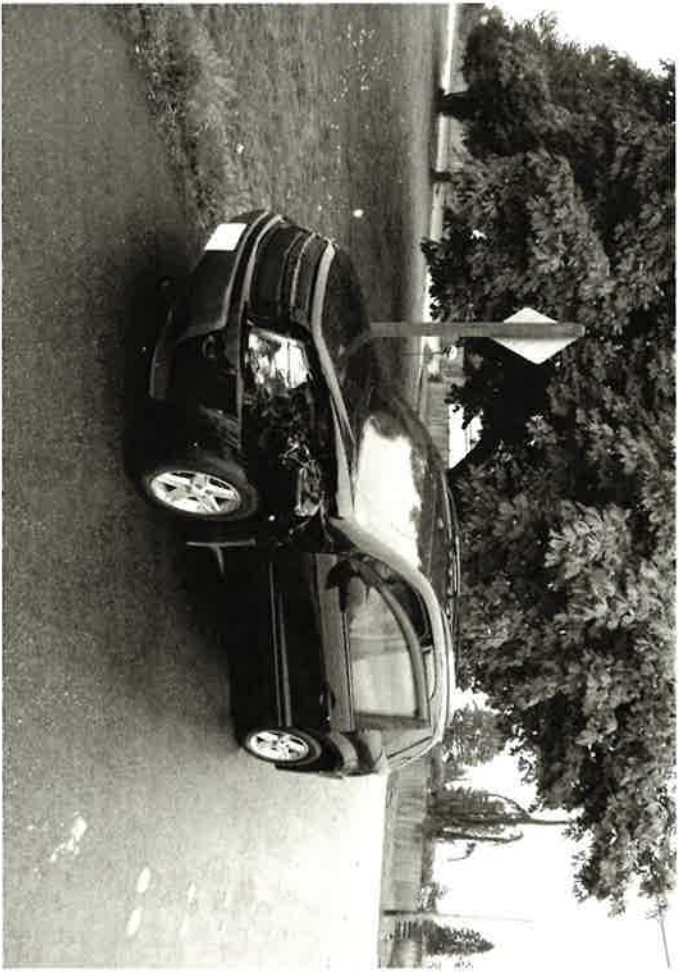
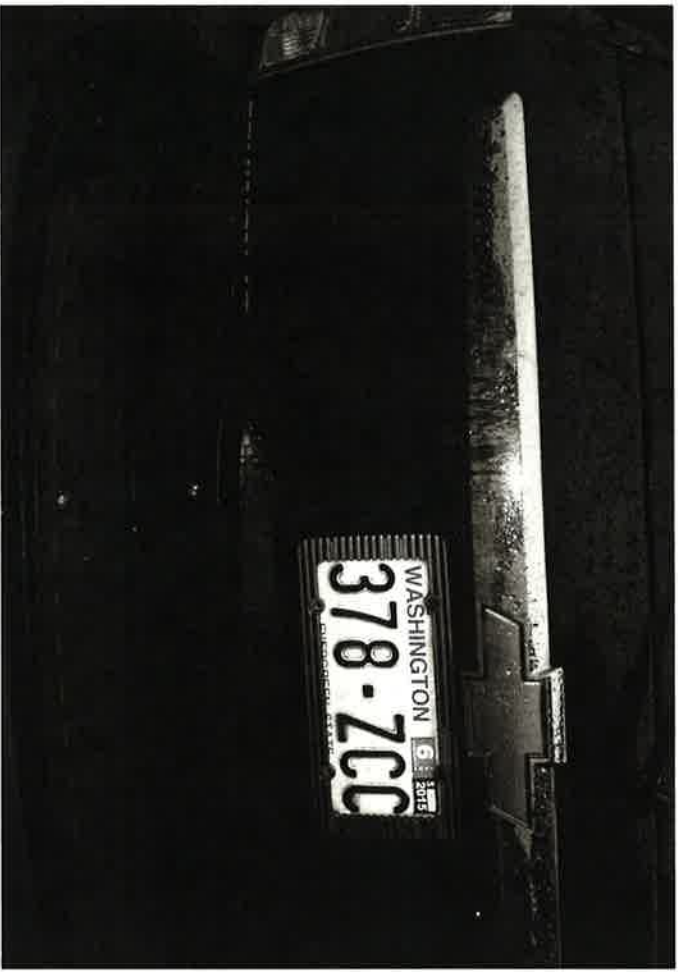
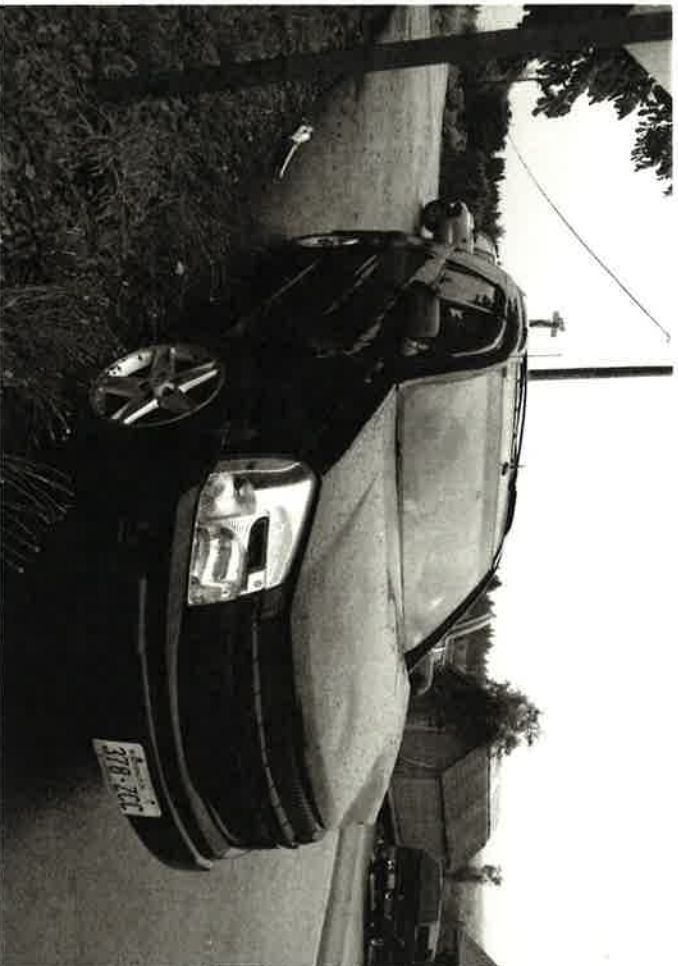


PHOTO  
REPORT





**LSPD**  
**ORIGINAL**

Incident History for: #SS14018781

Case Numbers: \$SS14002368

Entered 09/25/14 06:56:17 BY SPCT09 SP0291

Dispatched 09/25/14 06:57:23 BY SPDP17 SP0379

Enroute 09/25/14 06:57:23

Onscene 09/25/14 07:11:32

Closed 09/25/14 08:05:24

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS003 Fire BLK: AG1417 Map Page: 397C-2 Group: SS1 Beat: SOUT

Src: T

Loc: 79 AV SE/8 ST SE , LKS (V)

Loc Info:

Name: RHODES, DAKOTA

Addr:

Phone: 5419156994

/0656 (SP0291) ENTRY , CC, NON INJ, NON BLKING, TAN DODGE DAKOTA VS BL  
K CHEVY EQUINOX  
/0657 (SP0379) DISPER 19D2 #SS127 ADAMS, OFFICER (NATHAN)  
/0704 (SS127 ) REMINQ 19D2 MDTVEH, 618YMH, , WA, , , , , , , , , ,  
/0704 REMINQ 19D2 MDTWANT, , , , , , WA, BACKMCD469D4, , , , , , , , , ,  
/0711 \*ONSCNE 19D2  
/0711 (SP0241) SUPP NAM: C1538,  
TXT: AC, 2 VEH' S NON INJ NON BLKING  
/0739 (SP0371) ASNCAS 19D2 \$SS14002368  
/0805 (SP0100) CLEAR 19D2 D/H  
/0805 CLOSE 19D2

LSPD  
ORIGINAL